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ABSTRACT

This manual aims to help both teachers and family members maintain a coordinated program of educational principles and techniques to teach self-help skills to young Down Syndrome children both at school and at home. Section I focuses on general teaching techniques and strategies that can be used to teach many different skills, such as task analysis, reinforcement, modeling, backward chaining, graduated manual guidance, etc. Section II includes specific techniques related to feeding, dressing, grooming, and toileting. Section III comprises checklists which analyze the skills and break them down into small steps. (JDD)

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Teaching Self-Help Skills to the Child with Down Syndrome

ASSOCIATION FOR CHILDREN WITH DOWN SYNDROME, INC.

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A SELF-HELP CURRICULUM

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INTRODUCTION

It is important to encourage independent, self-care skills at an early age in your child. Attitudes and behavioral patterns are formed early, and the task of teaching your child to dress, undress, groom, feed and toilet will be easier if you help him/her develop an ability and a desire towards self-care.

Family members should learn to be observers and actively encourage independence.

The aim of this manual is to help both your family and your child's teachers maintain a coordinated program using the same principles and techniques both in school and at home.

— **SECTION I** focuses on general teaching techniques and strategies which can be used to teach many different skills.

— **SECTION II** includes specific techniques related to feeding, dressing, grooming and toileting.

— **SECTION III** is comprised of checklists which analyze skills and break them down into small steps.

Suggestions for Using This Manual

1. Very carefully read Section I and Section II.
2. Turn to Section III and select the skills you plan to teach.
3. Select the number in Section II where you will start your training program.
4. Turn back to Sections I and II and review parts that will prove helpful in teaching the skill that you have selected.

SECTION I

Selecting a Task to Teach

The following should be considered when selecting a skill to teach:

1. the skills that you, your family and your child's teacher believe are important for your child to learn NOW

2. your child's readiness to learn these skills (which prerequisite skills does he/she already possess and which need to be acquired?)

3. your child's interest in learning a specific skill (is there a skill that he/she particularly wants to learn and enjoys practicing?)

4. the age of your child (what self-help skills do children of the same age perform? Does your child have the "readiness" to learn these skills?)

Learning one skill at a time
can lead to knowing a whole set of skills and
experiencing a real sense of accomplishment!

Task Analysis

Task analysis is a method whereby a skill (e.g. spoon feeding) is broken down into **small steps** (or sub-skills). The ability to successfully accomplish a task usually requires the mastery of all the steps.

For example: independent spoon feeding requires a child to:

1. have adequate head and neck control
2. sit without losing balance
3. bring his/her hands to his/her mouth
4. retain a grasp on a spoon

The task of spoon feeding can be broken down into these sub-skills:

1. child will visually focus on spoon held at midline
2. child will suck strained food from a spoon
3. child will anticipate feeding activity by movements in oral area and/or limb movement
4. child will remove strained foods from spoon with active lip movements
5. child will eat masked foods when spoon-fed by caregiver (ex. applesauce, yogurt)
6. child will bring spoon filled with food (by caregiver) to his/her mouth, will remove the food and will eat it.
7. child will bring spoon filled with food (by caregiver) to his/her mouth, eat the food and return empty spoon to the bowl
8. child will scoop food onto spoon, bring it to mouth, remove food and return to bowl
9. child will feed independently with spoon sticky food (ex. pudding), small bite-size pieces (ex. fruit cocktail), liquid (ex. soup)
10. child will hold spoon in three-finger grasp when feeding independently
11. child will chew and swallow food before taking another spoonful.

Selection of a task to teach requires an understanding of the skills your child already possesses or can acquire. Attempting to teach a skill that is well beyond your child's ability will lead to frustration and probable failure.

REMEMBER: ANALYZE EACH TASK THAT YOU PLAN TO TEACH BY:

1. listing the steps required for task accomplishment
2. checking off the skills your child already possesses
3. listing the skills your child needs to acquire
4. **teaching gradually** - proceed to the next step only after your child has mastered the preceding one.

Principles of Reinforcement

Behaviors That are Followed by Rewards Tend to be Repeated

BEHAVIORS THAT ARE FOLLOWED BY REWARDS TEND TO BE REPEATED

Reinforcers that strengthen young children's behaviors are:

ATTENTION - attention can be positive, such as praise, a smile, touch or a kiss. Attention also can be negative, such as scolding or spanking. Note: most young children are constantly seeking attention from their parents, and, thus, attention serves as an extremely strong reinforcer of behavior.

TANGIBLE REWARDS - food, presents, permission to play with a favorite object (e.g. listen to the radio)

SUCCESS - the self-satisfaction of being able to achieve or accomplish something.

The reason for using rewards during teaching sessions is to motivate your child to perform a desired action. Once your child is able to accomplish a task, success will act as a reward in itself. You then will be able to start phasing out the extra rewards such as food treats. Praise alone should be sufficient to support his/her continued performance.

Steps to Follow When Using Rewards

1. Select the specific behavior that you will reward. Will you reward your child for the entire behavior or a subskill of the whole?
2. Select a reward that your child likes.
3. Teach your child that the ONLY way to receive the reward is to cooperate and perform the behavior.
4. Reinforce your child **immediately** after he/she has performed desired action.

Touching and verbal praise is highly reinforcing.

Example

task: removal of hat (with child assisting adult)
- say to child: "(name) , please take the hat off your head."
- wait; no response from child
- gesture with your hands and repeat, "(name), please take the hat off your head."
- wait; no response
- place your child's hands on his/her head
- wait; no response
- assist your child in removing the hat by placing your hands over your child's
- reward your child for assisting you

In this situation you are attempting to shape your child's behavior and are rewarding your child for a small step: assisting you.

You can also reinforce your child for any partial step or for the completion of a task.

Example

Removal of hat from
1. crown of head,
2. temples,
3. over ears,
4. normal hat position; in other words, the whole task.

Things to Remember When Reinforcing a Desired Behavior

1. It is essential that your child understands for which behavior he/she is receiving a reward.
2. Reward your child IMMEDIATELY after performing the desired behavior.
3. If you are using a food reward, also praise your child.
4. In some instances, you might be rewarding your child for small steps; later, you will require more of your child until the entire task can be done independently.
5. All those working with your child must CONSISTENTLY use the same rewards.

Teaching Techniques

When introducing a new skill, always give your child the opportunity to accomplish the task without any explanation or assistance other than your request for performance. If he/she is unable to perform the task, you should then proceed to structure the teaching sessions.

STRUCTURING THE TEACHING SESSION

1. Do a Task Analysis

   What are the specific steps necessary to accomplish the task?
   What skills does your child already possess?
   At what step should you start teaching?

2. Teach One Step at a Time

3. Eliminate Distraction

   Work with your child during a period in the day when he/she is in a good mood (not tired, hungry, etc.) and work in an area of the house that is free from distractions (no T.V., siblings or appealing toys nearby).

4. Use a Reinforcement

   Reward your child for his/her accomplishments.
   "Good boy, Matthew." "Good girl, Mary."

5. Be Consistent

   Consistently follow the same procedure.

6. Practice Daily

   Set aside specific short periods during the day.

The Following Teaching Techniques Have Proven Successful in Teaching Self-help Skills to Young Children:

TRIAL AND ERROR

By using trial and error your child is actively solving the task him/herself and is self-correcting mistakes. This is a very desirable way for young children to learn.

You say: "Peter, take off your shoe."
(Peter sits down on the floor, pulls at his shoe until he removes it over his heel, sole, and toe.)

PROMPT

A prompt is some form of gesture or command that guides and helps your child understand what you expect him/her to do.

Verbal Prompt

"Peter, put your hand on your shoe."
(Peter is given an additional verbal cue and now understands what you expect of him.)

Physical Prompt

You actually place your child's hand on his/her shoe and then you let your child proceed to take it off.

VERBAL INSTRUCTION

Verbal instruction is a teaching technique that helps your child perform a task by explaining to him/her what he/she must do. This can be done all at one time or in a step-by-step fashion. This technique requires that your child have the ability to understand what you are saying and is able to translate this into a plan of action.

- you say: "Peter, take off your shoe."
- wait; no response
- use physical prompt
- wait; no response
- then say: "Peter, place your hands on your shoe, take your shoe off over your heel, over the bottom of your foot and over your toes."

MODELING AND IMITATION

Most children learn from watching others perform. This technique requires that you demonstrate a procedure to your child and encourage him/her to imitate you.

- say to your child: "Peter, take off your shoe."
- wait for response
- repeat your request and show your child how to perform the task by actually taking off your own shoe.

BACKWARD CHAINING

Backward chaining is a technique whereby the final step of a skill is mastered first. When teaching a skill, think of the act in simple steps and then start backward.

(continued on next page)

Task for Backward Chaining: Removal of Shoes

Step 1. Remove your child's shoe to where it is only on his/her toes. Have child take off shoes from the toes.

Step 2. Remove your child's shoe over heel and have your child remove shoe over the sole and toes.

Step 3. Have your child remove shoe independently over heel, sole, toes.

See page 8a photos.

GRADUATED MANUAL GUIDANCE

Graduated manual guidance enables an adult to teach a child to perform a task by actually helping the child to do it. Place your hands over your child's hands and guide him/her through the task. At first, you will be removing your child's shoe using his/her hands. As your child becomes more competent, you will allow the child to take control.

Note: the goal of this technique is to fade out assistance as quickly as possible. Only give as much help as is necessary to finish the task. NEVER GIVE MORE ASSISTANCE THAN IS NEEDED. See page 8a photos

GENERALIZATION

The importance of generalization cannot be overemphasized. The ultimate goal of teaching a specific skill is to have the skill performed regularly by your child in any appropriate situation and with any similar equipment or materials. When a skill is learned, it can be demonstrated in environments under many different conditions.

Example

You teach your child to remove a front-opening jacket at home. You want this skill generalized to all situations (school, restaurant, movie theater, etc).

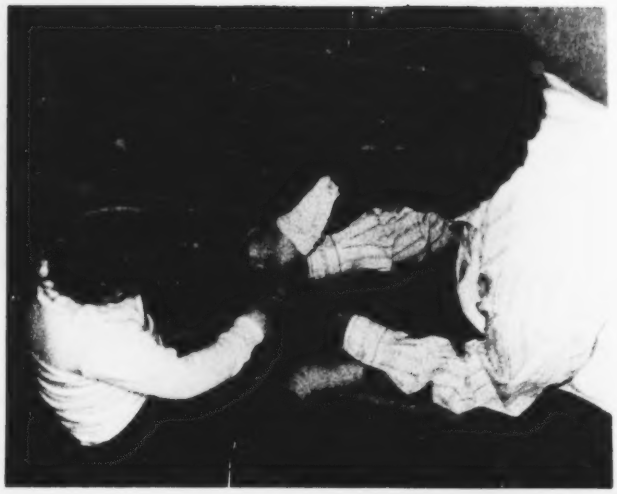
Ways to Promote Generalization

1. When possible, teach a skill in its natural setting:
   a. feeding at a table in dining room or kitchen;
   b. dressing in the bedroom or bathroom.
2. Use different objects in teaching:
   a. different types of cups (plastic, paper, glass);
   b. different foot coverings (sneakers, sandals, shoes).
3. Teach the skill in different settings:
   a. feeding in restaurant or grandparents' house, etc.;
   b. toileting in a public restroom with child's potty.
4. Use many different teachers:
   a. family members and friends after being shown how to teach skills.

NOTE: a good generalization program will integrate all four suggestions.

Backward Chaining

1



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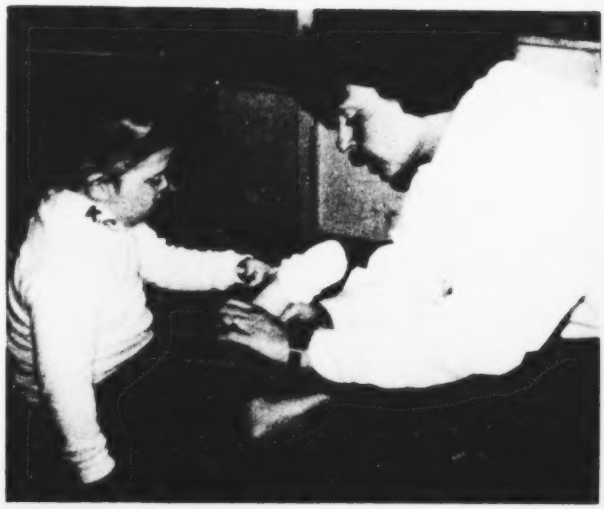


3

Graduated Manual Guidance

1

2

8A

Integration with Other Curriculum

All daily living activities are an integral part of your child's social environment. For this reason, no skill can be taught in isolation.

Feeding sessions provide excellent opportunities for your child to practice:

- gross motor skills
- fine motor skills
- speech skills
- social skills
- self-help skills

FINGER FEEDING

Gross Motor Skills - sitting balance (place your child in an upright position in a highchair)

Fine Motor Skills - using thumb and index finger (picking up small cheerios from a plate or tray)

Speech Skills - expressive language (chewing solid food to strengthen oral muscles)

Language Skills - increasing receptive vocabulary (name foods your child is eating)

Social Skills - table manners (learning to eat appropriately)

Self-help Skills - finger feeding (learning to feed self independently)

SPEECH AND LANGUAGE

Teaching skills, such as self-feeding, dressing, grooming, provides an excellent opportunity to promote language development. Talk to your child; explain in clear, simple sentences what you want him/her to do, name foods, utensils, etc., and label his/her actions. This will promote understanding words.

Teaching sessions can also be used to encourage expressive language. Before handing your child a spoon, hold it up, encouraging him/her to name it. Give your child opportunity to request items. You can give your child a choice of food. Place an unopened container with a cookie in front of him/her. Wait to be asked in some way to open it. Accept gestural responses if your child is using total communication. As your child's speech becomes more complex, ask simple questions requiring decision-making: "Peter, do you want a drink?" Praise verbal or gestural responses.

Finger feeding can improve gross motor skills, fine motor skills, speech and language skills, social and self-help skills.

POSITIONING AND MOVEMENT

Although your child may show the ability to accomplish a particular task, he/she might be using abnormal patterns of movement or behavior in order to achieve the goal. If so, it might be wiser to inhibit his/her performancé until a more normal pattern can be established.

Example

> Your child has evidenced the behavior of independent cup drinking BUT while performing this task rest the cup on his/her tongue instead of the lower lip. As a result, you may decide that it would be better to temporarily delay independent cup drinking until more appropriate oral control can be achieved.

SOCIAL-EMOTIONAL DEVELOPMENT

Task accomplishment helps promote self-satisfaction, a sense of achievement and a positive self-image. The importance of the latter cannot be overemphasized and is closely related to future academic as well as vocational performance.

Although, at times, you might feel discouraged, avoid hitting or raising your voice angrily at your child for being unable to perform successfully during teaching sessions. This will only cause your child to become upset. TIME and PATIENCE combined with appropriate task selection, good teaching techniques and positive reinforcement should result in eventual success.

INTRODUCTION TO SECTION II

The general strategies and techniques discussed in Section I can be easily incoporated into your daily routine. Once you have decided upon a skill, select what you think is an appropriate method or combination of methods to teach this skill.

SECTION II contains in greater detail techniques specifically related to feeding, dressing, toileting, and grooming and includes a section on ways to deal with behavior problems during teaching sessions.

The following general techniques have been used successfuly in teaching skills:

FEEDING: task analysis
modeling and imitation
physical prompting
backward chaining
graduated manual guidance
positive reinforcement

TOILETING: physical prompting
backward chaining
positive reinforcement

DRESSING: task analysis
physical prompting
modeling and imitation
positive reinforcement
graduated manual guidance
backward chaining

GROOMING: task analysis
physical prompting
modeling and imitation
backward chaining
graduated manual guidance
positive reinforcement

Feeding

Feeding is a very important part of an early intervention program. In addition to the nutritional aspect of feeding, it is essential to begin to develop as early as possible feeding skills which will enable your child to eat independently. Sucking, biting, chewing, swallowing, which are all used in the feeding process, are also necessary skills to master for the development of speech. The jaw, lips, teeth, palate and tongue's primary function is for eating, while the secondary function is that of speech. Therefore, it is important for your child to learn to control his/her jaw muscles, tongue, etc., so that he/she will be able to not only eat independently, but, also, will strengthen the same muscles used to make speech sounds.

Each child with Down syndrome is unique. Your child will be developing his/her own special personality. Feeding habits, food preferences, etc., will also be unique. Time and patience will be required for some children to acquire certain skills while others may pick them up readily. However, in the end, the reward will be to see your child happy, healthy and feeding him/herself.

Remember: feeding time should be relaxed and enjoyable for both you and your child. Feeding schedules should be adapted as much as possible to accommodate the household routine.

Feeding should not be rushed. It is a time of great pleasure for a parent and child.

The following general suggestions in the areas of spoon-feeding, eating table foods, giving up the bottle, cup-training, finger-feeding and spoon and fork-training should serve as guidelines to be used in conjunction with the more specific training suggestions that are part of the school feeding program.

Some General Guidelines to Follow During Feeding

1. Start feeding training at the beginning of a meal when your child is most hungry. Food will most likely at this time act as reward for appropriate behavior.

2. Children learn by repetition. At times, you might find training frustrating, but each step must be repeated in a systematic way often many times until...success!

3. Set up a systematic training approach. Break down the feeding skill that you are attempting to teach into simple steps.

4. **Consistency** and patience are extremely important!

5. It is a good idea that more than one person learn how to feed your child. Teach them the same techniques you use.

6. Make sure your child understands the task that you are trying to teach.

7. Teaching periods should be short. Stop when your child becomes distracted or tired.

8. Feeding periods should be relaxed for both you and your child. Don't hurry through a training session.

9. Encourage your child to feed him/herself, but give assistance when it is really needed.

10. Talk to your child during feeding, and let him/her know what he/she is doing. Feeding time is a good time to stimulate language. Speak clearly and make directions short and easy to understand.

11. Your child should be in an upright position during feeding. The feeding apparatus that your child uses should offer solid support and security. Check to insure that your child's
    a. back is straight
    b. hips are at right angles
    c. feet are resting on supports
    d. head is at mid-position.

12. If a child demonstrates undesirable or inappropriate behavior during a feeding session (e.g. throwing spoon or cup, spitting food, playing with food, etc.) do not reprimand him/her. Immediately remove the food and utensils for a short period (about 20 seconds). During this period, give the child no attention. Then present the food again. If the inappropriate behavior continues, remove the food and utensils and feed him/her at another time.

(continued on next page)

13. Reinforcing desired responses is extremely important when your child is learning self-feeding. The food acts as a primary positive reinforcer. Praise is also highly effective as a reinforcer. Show your child you are proud of him/her (praise, smile).

14. Remember all children are somewhat messy when first learning to feed themselves. Expect this and provide extra bibs, towels, floor coverings, etc.

15. Minimize the distractions in the room where your child is being fed so that he/she can concentrate on the feeding.

16. NEVER leave a child unattended in a high chair or infant seat.

17. End a feeding session if you begin to lose patience or when your child loses interest in eating.

18. New skills take time to develop. Remember: patience and confidence!

Why Is Good Nutrition Important?

A balanced diet is required for good mental and physical growth and development. This means that a child's learning ability, body growth and rate of maturation can be hindered unless supplied with good nutrition.

The first five years of life are particularly important to the growing child. Brain cells are present at birth and continue to grow and enlarge until after puberty, with the greatest growth occurring during the first five years. It is very important that the child receives adequate protein during this period.

Good nourishment is required to keep the body healthy. Inadequate consumption of proteins, carbohydrates, minerals, vitamins and water can result in inability to fight illness. If the body is greatly lacking in a particular nutrient, the result may be a nutritional deficiency disease which can cause permanent injury to the body.

Adequate nutrition is extremely important for a child to be able to perform at his/her best.

What to Keep in Mind When Designing a Diet for Your Child

VARIETY - CHOOSE FROM THE FOUR BASIC FOOD GROUPS:

1. meat, fish, eggs, poultry, peanuts, pinto beans (some other beans and nuts)
2. milk and cheese products
3. bread, cereals, rice, fats
4. fruits and vegetables

READ LABELS - look for enriched products, particularly breads, cereals, milk and juices. Contents of packages are listed in order of quantity in package - you can catch tricks in advertising.

Your child is growing rapidly and requires food high in protein(groups #1 & #2), vitamins (#4 & #3), minerals (particularly calcium and iron #1, #2, enriched #3 and #4).

It is important to use whole grain products when available, e.g. whole wheat bread, brown rice, whole grain cereals. It is also important to limit the foods which are high in fat, e.g. butter, very fatty meats, fried foods, whole milk, cooking oils.

Partially skim milk or straight skim milk can be substituted for whole milk if necessary. Foods can be prepared by broiling instead of frying. Fresh fruits and vegetables should be used when available. Important nutrients can be lost in the freezing and canning processes. Canned foods can be high in sodium and should be avoided when possible. "Empty" calories should be avoided. An "empty" calorie is one in which there is no nutritional value in the product, just calories.

Remember - small children need small servings!

Feeding from a Spoon

1. Hold your child in an upright position or elevated upright in an infant seat or highchair. This position is better for both feeding and digestion. Make sure your child's head is in midline with chin tucked. This will encourage a better swallow.
2. Use a small spoon that is appropriate in size for your child's mouth.
3. Present food from the midline (center of face) position. This will enable your child to see the food as it comes towards his/her mouth.
4. Place the spoon betweeen the child's lips on the middle of the tongue with a **slight** downward pressure. This will eliminate a tendency of your child to push the food out of his/her mouth.
5. Allow your child to close his/her lips over the spoon and to remove food with lips. Remove the spoon straight out: **do not scrape food off by using the child's upper gums or teeth.**
6. Feed small amounts at a time. Your child will have a tendency to thrust out large amounts.
7. Encourage your child to look in the direction of the food and to anticipate the spoon by coming forward with his/her head and opening his/her mouth.

Introducing Table Foods

1. The best way to introduce table food is gradually. This way your child does not realize the food is becoming more textured. The thicker the texture, the more work the child's muscles do when eating.
2. Gradually increase the textures of the food. A food grinder or blender may be helpful until your child eats only table foods. You can grind or blend all meats and vegetables.

   SOME SUGGESTIONS ARE: introduce mashed foods, thicken food with skim milk powder, add mashed potatoes,mashed banana, mashed cottage cheese, bran wheat germ. Increase textures to more solid foods such as cottage cheese, small pieces of unprocessed cheese, unsweetened chopped canned peaches, hamburger, meat loaf, etc.
3. A CHILD IS ABLE TO BITE AND CHEW WITHOUT TEETH. Foods such as bananas, cookies, soft toast, cooked carrots, and cheerios are good. Introduce meats gradually - soft chicken or hamburger is good.
4. Put the food in the back of your child's mouth on the molar surface. Do not put food in the center of the mouth. Don't always place the food on same side. This will help to bring the child's tongue to the side to begin chewing.
5. Do not allow your child to wash food down with liquids immediately after placing food in his/her mouth. Before offering a drink, give your child time to chew the food.

6. If your child has a tendency to gag, make sure his/her head is forward with chin tucked in during feeding. All children gag a bit when new foods or solids are introduced.
7. New food should be introduced at the beginning of a meal when the child is hungriest.
8. It is advisable to provide variety in your child's diet so that he/she will learn to handle different foods. Do not mix food together; mixing will interfere with taste discrimination.
9. Certain food, such as white bread, become gummy when chewed and might cling to your child's upper palate. Therefore, foods of a harder consistency (e.g. toast) are preferable.
10. Give your child opportunity to bite a cookie. Place the cookie between your child's upper and lower front teeth. If your child does not bite, gently press up under the chin until the teeth make contact with the cookie and bite a piece off. Pieces should be encouraged.

Finger-Feeding

In order to know how to feed him/herself, your child must be given many opportunities to learn. Look for signs of readiness: can your child grasp and release a a toy? Can your child bring a toy or rattle to his/her mouth? These behaviors are indications of readiness for self-feeding.

1. Sit your child in a highchair or place a soft cookie or cracker in his/her hand; help guide the cookie to your child's mouth.
2. LATER: hold cookies out in front of your child to encourage reaching for it.
3. Place small, bite-sized pieces of food (bits of boiled carrots, banana, dry cereal - cheerios eaten one at a time - scrambled eggs, toasted unprocessed cheese) on the highchair tray. Encourage your child to pick up the food and put it in his/her mouth; physically guide the child's hand, if necessary. Stand back and slightly to the side. At first, place only one piece of food at a time on the tray so your child will not stuff.
4. First use food which can be picked up with the fist if your child does not use the thumb and forefinger. Later, use smaller pieces.
5. Most foods can be chewed easily without teeth.
6. See that your child chews and swallows the food in his/her mouth before placing more food in.
7. Learning to feed oneself requires a period of experimentation. Some messiness is to be expected!

Spoon & Fork Training

1. While your child is young, allow him/her to experiment with a spoon, grasping and releasing it.
2. Previously, your child learned to use his/her hands for self-feeding (finger-feeding). Now, your child has to learn to use a spoon as a tool. (note: even after learning to feed with a spoon, your child will still continue to use his/her hands part of the time. This is to be expected - all children do it.)
3. Use a plastic bowl with a suction bottom rather than a flat dish, because the sides of a bowl can be pushed against, making it easier for the food to get on the spoon.
4. Stand slightly behind and to one side of your child.
5. Place your child's hand on the spoon with your hand over his/her hand.
6. Slowly guide your child's hand toward the bowl, scoop the food on the spoon, guide the spoon to your child's mouth and then back to the bowl.
7. Reduce the amount of guidance as your child shows increased ability.
8. The first independent effort that your child will make will probably be right before the spoon is put in his/her mouth. At this time, loosen your grasp and keep your hand ready to gain guiding control again, if necessary.
9. Foods that easily stick to a spoon are good to use, such as yogurt, mashed potatoes, cooked cereal, squash, tuna salad, puddings and thickened apple sauce.
10. Use food that your child likes.
11. These steps should be repeated several times at first and then increased with additional feedings. Praise your child for attempts and successes, showing how proud you are by clapping, patting, etc.
12. The steps for teaching your child to use a fork are the same as for spoon-feeding.
13. Foods that can be easily picked up or jabbed with a fork are: french toast, unprocessed cheese, small pieces of meat loaf, pancakes, etc.

Drinking From A Cup

1. Introduce the cup when your child demonstrates adequate head and neck control. Initially you may want to begin by holding your child in your arms. Cup drinking in the highchair may be easier.
2. Use a small clear plastic cut-out cup or a shot glass (2 oz.). Do not use cups with lids. The cup should be clear so you can judge how much liquid there is in the cup. A small cup does not need to be tilted as far back as a taller cup, nor does it have an opening that is too wide for your child's mouth.
3. Tilt **only** the cup, not the child's head. Offer the child his/her favorite liquid in the cup.

Oral (Jaw) Control

Drinking

Infant drinks from cup with adult help

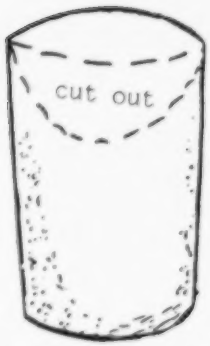
At table, toddler drinks with adult help

Feeding

Spoonfeeding in infant chair

Placing food on child's molar surface

4. You might try thickened liquids such as thinned, plain yogurt or cereal, baby apple sauce or melted ice cream, at first. These foods are easier to swallow and the liquid will not rush out as fast.



5. Place the cup on the child's lower lip. Check to be sure your child's lips are closed over the cup and that the cup is not resting on his/her tongue or held between the teeth. If the cup is on your child's teeth, your child will have a tendancy to bite the cup.

6. During drinking,your child's head should be held slightly forward so that the liquid will not rush down his/her throat and there will be better control when swallowing.

7. If liquid continue to escape from the sides of your child's mouth, you may need to spout the cup by depressing the sides; this will bring your child's lips in a bit. To accomplish these goals, you may need to use technique - oral (jaw) control. (illus. p. 20)

8. When your child shows signs of accepting the cup and demonstrates proper lip closure and swallowing of liquids, start encouraging independence by teaching your child to hold his/her own cup. Remember to: a) stand behind your child; b) place your child's hands on the cup with your hands over his/hers;c)guide the cup to his/her mouth, tilt it and let your child sip and swallow liquid; d) guide the cup back to the table or highchair tray.

   Gradually fade out the amount of assistance that is required during this sequence.

Giving Up the Bottle

Daytime: from about one year to 18 months, your child should be replacing the bottle with a cup. Below are some suggestions for a bottle withdrawal schedule. Children who are breastfed should also be introduced to the cup during the abovementioned age. Remember that this is just a guideline. You should fade the bottle first that your child is least hungry for or dependent upon. Also, the bottle that you rely on least for your peaceful time is a good bottle to fade first. Parents know their own schedule with their own child.

1. Replace snack or lunch bottle with a cup for three to four days.
2. Then replace breakfast bottle. Now your child is off breakfast, lunch and snack bottle. Wait three to four days.
3. Stop giving the dinner bottle.

This process will take approximately 12 to 16 days.

Toilet Training Sessions

Research in toilet-training young children indicates that positive reinforcement - praise and food rewards - is highly effective in shaping behavior and teaching new skills (see Principles of Reinforcement, Sec.I).

1. If you plan to use edible reinforcement, keep a supply of food treats in the bathroom available for immediate reinforcement.
2. The atmosphere during toilet-training should be **calm** and **relaxed**.
3. Even if your child is extremely uncooperative, do not scold or punish. Reward your child for any acceptable approach to the bathroom.
4. If your child has an accident, say, "No wet pants." Have the child who is capable pull down the wet pants and place them in an appropriate receptacle.
5. Consistency is essential!
6. Everyone involved in your child's toilet-training should follow the same procedures. This will insure greater consistency.
7. Keep your child in training pants during the day.
8. It is recommended that a potty chair that offers solid support be used, that your child's feet be able to rest on the floor and that your child be able to get on and off the potty by him/herself.
9. Toilet-training can be frustrating at times, and requires time and patience on the part of the parent.
10. Time on the toilet should not be longer than five to 10 minutes.
11. When you and your child are just beginning a toilet-training program, it is important to know how often your child wets, so that you are better able to take him/her to the toilet before your child urinates.
12. **Make a chart.** Check your child every 15 minutes, and record whether he/she is wet or dry. If your child remains dry for one hour, then adapt the checking schedule to 1½ hours and so on. If your child is wet, change his/her diaper or training pants.

Examples of popular potty chairs.

Toilet-Training Procedures

Below is an outline of a toilet-training program that has been successfully used in early intervention programs. These procedures work well if followed consistently over a period of time. Therefore, it is necessary to:

1. follow the steps;
2. reinforce your child immediately and appropriately - a small, edible treat is very effective;
3. be consistent

Procedures

1. Lead your child to the bathroom and say, "Let's go potty," or"urinate" or whatever term you have designated for this function. Use the sign for potty when appropriate.
2. Feel pants and say, "Dry, good boy/girl." Have your child feel his/her clothing as you give a reward.
3. Have your child remove his/her clothing or assist you in removing the clothing.
4. Sit your child on the toilet in a secure position, making sure his/her feet are on the floor.
5. Use a consistent term to tell your child to urinate and stand near the bathroom door while your child is on the potty.
6. Time your child for five minutes.
7. If your child eliminates, reinforce with social praise and a food reward.
8. If your child does not urinate, remove him from the toilet and say, "Stay dry."
9. Have your child assist you, or allow him/her to pull up his/her own clothing.
10. If during the day your child indicates that he/she is about to eliminate, rush your child to the bathroom and start at step 4.
11. Take your child to the potty on the schedule as noted in Item 12 of Toilet-Training Suggestions.
12. A potty chair should always be available regardless of where you are.
13. Once your child is in training pants, do not use a diaper except during the night.
14. When your child is consistently eliminating on the toilet, he/she should be rewarded for:
    a. being dry when taken to the toilet;
    b. making his/her need to eliminate known to adult;
    c. going to the toilet independently.

While toilet-training, your child will have frequent accidents. Point out that he/she has wet pants and "not nice", but punishment should be avoided. When a toilet accident occurs, change your child as soon as possible. When in dry pants have the child feel his/her underpants and say to your child, "Dry pants. Good boy/girl."

Dressing and Grooming Skills

Dressing skills develop gradually over a period of time. At first, your child will passively cooperate while being dressed. Later, your child should be encouraged to actively assist an adult by holding out a leg to go into his/her pants, or by holding out an arm to go into a sleeve of a jacket, etc.

When teaching dressing or undressing, a child's clothing should fit loosely. If clothing is easier to manage, children can be more independent when learning these skills. Fasteners, such as zippers, can be built up with masking tape or an object which is easy to pull, like a charm, can be attached to the zipper. When beginning to teach pulling pants down and up, sweatpants and other clothing without fasteners should be used.

Grooming skills, like dressing skills, also develop gradually. While brushing your child's hair or washing his/her face, encourage your child to assist you whenever possible. As a result of this, the act of grooming will become familiar, and it will be much easier for your child to take over these functions.

Both dressing and grooming skills are sequential and can be divided into simple steps. Let one step at a time be mastered, and remember to reward your child for attempts as well as accomplishments. A hug, smile or praise will let your child know that you are feeling proud.

"This is the way we brush our teeth, brush our teeth, brush our ..."

Dealing with Behavior Problems During Teaching Sessions

Some children will participate cooperatively during teaching sessions while others might show no interest in the task and wander away, refusing to focus or participate. Other children might actively resist by crying, throwing materials or having a tantrum.

The strategies described below are used to eliminate interruption of learning. Each time your child is successful in avoiding a learning activity, non-cooperative behaviors are being rewarded.

Remember: behaviors that are followed by a reward tend to be repeated in similar situations.

Your child's reward, in a situation of disruptive behavior, might be the termination of a teaching session. It is, therefore, important to try to minimize behavior problems during teaching sessions by:

1. selecting tasks that are within your child's abilities;
2. selecting tasks that will lead to success;
3. providing your child with a meaningful reward;
4. rewarding your child for appropriate or "on task" behaviors;
5. rewarding immediately;
6. not inadvertently reinforcing undesirable behaviors;
7. rewarding for completion of all tasks, even if the task appears to be very easy.

If a behavior problem occurs, analyze the possible causes. Consider:

1. is the task too difficult;
2. is the reinforcer rewarding;
3. is the teaching session too long;
4. is your child tired?

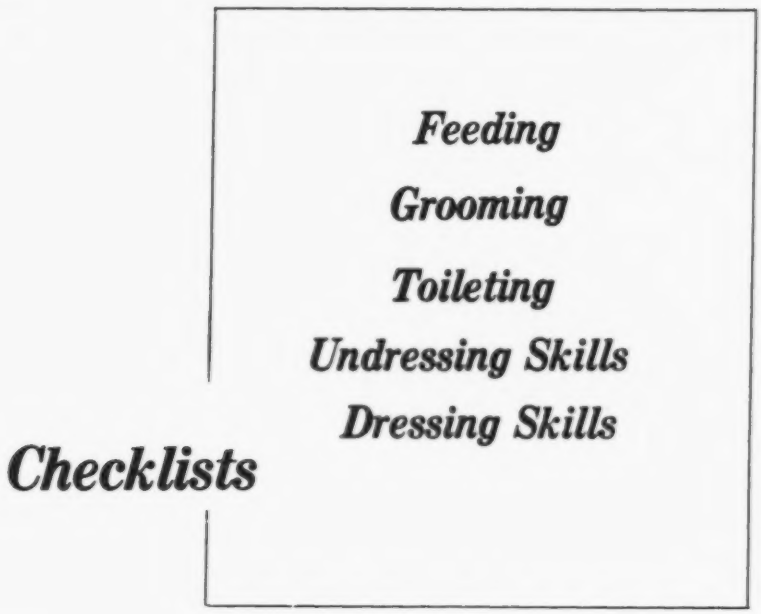
If the behavior problem persists, and you believe that there is no reason for this behavior to continue, cut the teaching session short, but end with your child cooperating and being rewarded for it by **calmly**, but **firmly**, guiding him/her through the next steps of the task, rewarding your child, and then discontinuing the session.

Behaviors . . .

Followed by Rewards . . .

Tend to be Repeated .

SECTION III


Feeding
Grooming
Toileting
Undressing Skills
Dressing Skills
Checklists

I. *Feeding*

Date Achieved

A. Drinking Liquids

1. Bottle

a. Child will orient toward oral stimulation with nipple from bottle. a. _____

b. Child will demonstrate adequate sucking ability. b. _____

c. Child will demonstrate lip closure around the nipple. c. _____

d. Child will coordinate respiration and sucking displaying nasal breathing. d. _____

e. Child will demonstrate anticipation of bottle activity by moving his/her mouth towards nipple. e. _____

f. Child will demonstrate awareness of bottle by placing hands over caregivers hand. f. _____

g. Child will assist caregiver in holding a bottle when caregiver utilizes graduated manual guidance (GMG). g. _____

h. Child will hold bottle independently to drink. h. _____

2. Cup

a. Child looks to a cup of liquid. a. _____

b. Child allows cup to be placed in his/her mouth with cup resting on lower lip. b. _____

c. Child will demonstrate lip closure around cup with oral control assistance. c. _____

d. Child will demonstrate lip closure around cup without oral control assistance. d. _____

e. Child will swallow a thickened liquid with oral control assistance given in a shot glass, cut-out cup or plastic cup given by caregiver. e. _____

f. Child will swallow a thickened liquid without oral control assistance given in shot glass, etc. given by caregiver. f. _____

g. Child demonstrates two-three successive swallows utilizing a a thickened liquid. g. _____

h. Child will swallow a clear liquid for two-three successive sips. h. _____

i. Child will assist in holding cup when caregiver utilizes GMA. i. _____

j. Child will independently pick up empty cup and bring it to mouth. j. _____

k. Child will return cup to table independently after taking a sip assisted by caregiver. k. _____

l. Child will drink from cup and return cup to table after caregiver has assisted lifting cup to lips. l. _____

m. Child will lift cup off table, bring to mouth, drink from it and return to tray using two hands. m. _____

n. Child will lift cup off table, bring to mouth, drink from it and return to tray using one hand. n. _____

Date Achieved

3. Pouring Liquid into a Container
   a. Child will place his/her hands on small container and will assist caregiver in pouring liquid from container into a glass. a. _____
   b. Child will hold small plastic container with spout and a top and will pour liquid from container into glass held steady by caregiver. b. _____
   c. Child will pour liquid from a container into a glass with one hand; at same time will hold glass with other hand. c. _____
   d. Child will hold a glass under running water faucet and will fill glass after caregiver has turned faucet on. d. _____
   e. Child will turn on cold water faucet and will fill glass with water. e. _____
   f. Child will turn on cold water handle, fill glass with water and turn off water. f. _____
   g. Child will carry a partially filled glass five feet without spilling the water. g. _____
   h. Child will carry a partially filled glass five feet and will set glass down on a table without spilling. h. _____

4. Straw-Drinking
   a. Child will maintain lip closure around straw. a. _____
   b. Child will demonstrate control of airstream orally by blowing a feather or a tissue. b. _____
   c. Child will demonstrate ability to ingest liquid when caregiver squeezes liquid into straw. c. _____
   d. Child will demonstrate ability to ingest liquid when caregiver squeezes liquid into straw. d. _____
   e. Child will demonstrate straw-drinking by ingesting liquid using a shortened straw. e. _____
   f. Child will demonstrate straw-drinking using a regular length straw. f. _____
   g. Child will drink from a straw independently. g. _____

B. Solid Foods
   1. Spoon Feeding
      a. Child will visually focus on spoon held at midline. a. _____
      b. Child will suck strained food from a spoon. b. _____
      c. Child will anticipate feeding activity by movements in oral area and/or limb movement. c. _____
      d. Child will remove strained foods from a spoon with active lip movements. d. _____
      e. Child will eat mashed foods when spoon-fed by a caregiver. (ex. applesauce, yogurt) e. _____
      f. Child will bring a spoon filled with food (by caregiver) to his/her mouth, remove the food and eat it. f. _____

Date Achieved

Solid Foods. Spoon-Feeding continued.

g. Child will bring a spoon filled with food (by caregiver) to his/her mouth, eat the food and return the empty spoon to the bowl. g. _____

h. Child will scoop food onto spoon, bring it to mouth, remove food and return spoon to bowl. h. _____

i. The child will feed independently with a spoon sticky foods (ex. puddings). i. _____

j. The child will feed independently with a spoon small bite-sized pieces (ex. fruit cocktail) j. _____

k. The child will feed independently with a spoon liquid (ex.soup) k. _____

l. Child will hold spoon in three-finger grasp when feeding independently. l. _____

k. Child will chew and swallow food before taking another spoonful. k. _____

2. Eating Table Foods

a. Child will demonstrate tongue lateralization when semi-solid food is placed into side of mouth by caregiver (such as cooked carrot, bananas, crumbled cookie). a. _____

b. Child will swallow pieces of semi-solid food without choking. b. _____

c. Child will chew and swallow a crunchy food placed into the side of the mouth by caregiver. c. _____

d. Child will chew and swallow a chewy food placed into the side of the mouth by caregiver. d. _____

e. Child will chew and swallow a lumpy food place into the side of the mouth by caregiver. e. _____

f. Child will exhibit taste discrimination by grimacing when presented with sour, salty or sweet foods. f. _____

g. Child shows readiness for eating finger foods by grasping and releasing a small block or poker chip. g. _____

h. Child will eat a cookie that is held in his/her hand by a caregiver using graduated manual assistance. h. _____

i. The child will hold a cracker or cookie placed in his/her hand by caregiver. i. _____

j. The child will reach out and take an offered cookie or cracker. j. _____

k. The child will grasp a cookie or cracker, bring it to his/her mouth and take a bite. k. _____

l. The child will take an appropriately sized bite. l. _____

m. Child will finish chewing and swallowing food in his mouth before taking another bite. m. _____

n. Child will hold a bite-sized piece of food (ex. cheerios) in his/hand when placed there by caregiver. n. _____

Solid Foods. Eating Table Foods continued.

Date Achieved

o. The child will bring small finger food (cheerio) to his/her mouth after being placed there by an adult and will feed it to him/herself. o. _____

p. Child will pick up small finger food from a tray, table or plate and eat it. p. _____

q. The child will finish chewing bite-sized pieces of finger food before placing more in his/her mouth. q. _____

r. Child will hold finger foods in hand using a pincer grasp (thumb and index finger). r. _____

s. Demonstrating appropriate oral control, the child will independently eat ¼ sandwich, then ½ sandwich, working up to whole sandwich (ex. hamburger). s. _____

t. Child will appropriately lick such food as an ice cream cone, popsicle and/or lollipop. t. _____

u. Child will demonstrate the ability to discriminate edibles and non-edibles. u. _____

3. Fork-Feeding

a. Child will permit caregiver to assist him/her during fork-feeding. a. _____

b. The child will direct a speared piece of food (by caregiver) to his/her mouth and remove the food and chew it. b. _____

c. Child will spear piece of food from a bowl onto a fork. c. _____

d. Child will chew all the food in his/her mouth before spearing more. d. _____

4. Plastic Knife Skills

a. Child will demonstrate ability to spread sensory materials (chocolate pudding, etc.) with finger. a. _____

b. Child will place hands on knife and assist adult in spreading. b. _____

c. Child will hold knife independently and spread (ex. butter on bread) c. _____

d. Child will demonstrate ability to cut sensory material with popstick. d. _____

e. Child will place hands on plastic knife and assist caregiver in cutting. e. _____

f. Child will hold knife independently and cut (ex. sandwich in half). f. _____

Date Achieved

II. *Grooming*

A. Identifying

1. Recognizing Objects by Name

a. Child will identify by pointing or signing for a brush. a. _____

b. Child will identify by pointing or signing for a comb. b. _____

c. Child will identify by pointing or signing for a toothbrush. c. _____

d. Child will identify by pointing or signing for a washcloth. d. _____

e. Child will identify by pointing or signing for a tissue. e. _____

2. Recognizing Objects by Use

a. Child will demonstrate an understanding of what a brush is used for by pointing or by signing or verbally answering, "What do you brush your hair with?" a. _____

b. By answering in the same manner as above, child will answer the the question, "What do you comb your hair with.? b. _____

c. By answering in the same manner as above, child will answer the question, "What do you brush your teeth with? c. _____

d. By answering in the same manner as above, child will answer the questions, "What do you wash your face with?" d. _____

e. By answering in the same manner as above, child will answer the question, "What do you wipe your nose with?" e. _____

B. Hair Grooming

1. Comb

a. Child will allow caregiver to comb his/her hair. a. _____

b. Child will allow caregiver to assist in combing child's hair by using graduated manual assistance. b. _____

c. Child will take a comb in hand, bring it to his/her hair and rake comb through front, sides and back of hair. c. _____

d. Child will return comb to table or washstand when finished combing. d. _____

e. Child will comb his/her hair so that it looks well-groomed. e. _____

2. Brush

a. Child will allow caregiver to brush his/her hair. a. _____

b. Child will allow caregiver to assist in brushing the child's hair by using graduated manual assistance. b. _____

c. Child will take brush in hand, bring it to his/her hair and stroke brush through his/her hair. c. _____

d. Child will brush front and sides of hair. d. _____

e. Child will replace brush on table or washstand. e. _____

f. Child will brush hair so that it looks well-groomed. f. _____

Date Achieved

C. Toothbrushing

1. Brushing

a. Child will permit caregiver to brush his/her teeth when there is no paste on the brush. a. _____

b. Child will permit caregiver to brush his/her teeth when there is paste on the brush. b. _____

c. Child will cooperatively assist caregiver brushing his/her teeth. c. _____

d. Child will imitate caregiver stroking a toothbrush up and down when there is no paste on the brush. d. _____

e. Child will take a toothbrush with paste on it, bring to his/her mouth and brush teeth with an up and down motion. e. _____

2. Toothpaste

a. Child will squeeze toothpaste on his brush when caregiver has unscrewed the top. a. _____

b. The child will replace the toothpaste on a table or washstand. b. _____

c. Child will unscrew the cap on the toothpaste, squeeze toothpaste on brush, replace toothpaste on washstand, and brush teeth. c. _____

3. Rinsing

a. Child will rinse toothbrush under cold water after caregiver has turned water on. a. _____

b. Child will turn on cold water, rinse toothbrush and turn off water. b. _____

c. Child will not swallow the water and will not attempt to add more water in his/her mouth until spitting out water already in his/her mouth. c. _____

d. Child will assist adult in filling glass with water. d. _____

e. Child will fill glass of water, bring it to mouth, hold water in mouth, rinse teeth and spit out water in basin. e. _____

f. Child will turn on cold water, fill cup, rinse mouth, spit out water, place cup down and turn off cold water. f. _____

D. Washing

1. Face

a. Child will permit an adult to wash his/her face. a. _____

b. Child will cooperatively assist an adult washing his/her face using graduated manual assistance. b. _____

c. Child will return washcloth to table or washstand after an adult has assisted child in washing face. c. _____

d. Child will take a wet washcloth and stroke his/her face. d. _____

e. Child will bring wet washcloth to face, stroke face and return cloth to washstand. e. _____

f. Child will adequately wash face so that it looks clean. f. _____

g. Child will turn on faucet and wet washcloth under cold water. g. _____

h. Child will squeeze washcloth so that water doesn't drip. h. _____

i. Child will independently turn water on/off, moisten washcloth, and wash face so that it looks clean. i. _____

Date Achieved

2. Hands
   a. Child will point to sink when caregiver asks, "Where is sink?" or "Show me sink." a. _____
   b. Child will cooperate while caregiver washes and dries child's hands. b. _____
   c. Child will appropriately dispose of paper towel in garbage after an adult has washed and dried child's hands. c. _____
   d. Child will dry hands with a paper towel and dispose of towel in garbage. d. _____
   e. Child will rinse hands under cold water that caregiver has turned on. e. _____
   f. Child will lather hands with soap by rubbing together, rinse under cold water when soap has been put on by caregiver. f. _____
   g. Child will pick up soap and lather hands, replace soap on washstand and rinse hands under cold water. g. _____
   h. The child will turn off cold water after caregiver has turned it on. h. _____
   i. Child will pull a paper towel from the towel dispenser. i. _____
   j. Child will dry hands with a paper or cloth towel. j. _____
   k. Child will turn on the cold water and wash hands independently. k. _____

E. Nasal Hygiene
   1. Tissues
      a. Child will pull tissue from box with caregiver's assistance. a. _____
      b. Child will pull tissue from box independently. b. _____
      c. Child will put tissue over nose with caregiver's assistance. c. _____
      d. Child will put tissue over nose independently. d. _____
   2. Blowing
      a. Child will blow air through nose with caregiver's assistance. a. _____
      b. Child will blow air through nose independently. b. _____
      c. Child will pinch both nostrils closed with caregiver's assistance. c. _____
      d. Child will pinch both nostrils closed independently. d. _____
      e. With caregiver's assistance, child will wipe area around nose so that all mucus is removed and nasal area is clean. e. _____
      f. Child will independently wipe around nose so that all mucus is removed and nasal area is clean. f. _____
   3. Maintenance Initiative
      a. Child will demonstrate discomfort when nasal area is dirty, wipe it with a tissue and dispose of tissue in garbage. a. _____
      b. Child will wipe nose independently using thumb and index finger. b. _____

III. *Toileting*

Date Achieved

A. Readiness

1. Behaviors

a. Child will remain dry for a period of one hour. a. _____

b. Child will accompany caregiver willingly to the bathroom. b. _____

c. Child willingly remains seated on potty or toilet. c. _____

d. Child eliminates when taken to toilet. d. _____

2. Dry Periods

a. Child remains dry between toileting sessions for 15 minutes. a. _____

b. Child remains dry between toileting sessions for 30 minutes. b. _____

c. Child remains dry between toileting sessions for 45 minutes. c. _____

d. Child remains dry between toileting sessions for one hour. d. _____

e. Child remains dry between toileting sessions for 1½ hours. e. _____

f. Child remains dry between toileting sessions for two hours. f. _____

B. Toilet Procedures

1 Pre-Elimination

a. Child will place hands over caregiver's hands and pull down his/her outer pants. a. _____

b. Child will pull down outer pants independently. b. _____

c. The child will allow caregiver to place hands over child's hands and pull down underpants. c. _____

d. The child will pull down underpants independently. d. _____

2. Post Elimination

a. The child will tear toilet tissue off roll. a. _____

b. Child will wipe body with toilet tissue after elimination. b. _____

c. Child will stand up after elimination. c. _____

d. Child will allow caregiver to assist child in pulling up underpants. d. _____

e. Child will independently pull up underpants. e. _____

f. Child will allow caregiver to assist in pulling up outerpants. f. _____

g. The child will independently pull up outerpants. g. _____

h. The child will wash and dry hands after toileting. h. _____

i. Child will flush toilet at appropriate time. i. _____

j. Child will leave bathroom when finished. j. _____

3. Independent Toilet Behaviors

a. Child will let his/her need to be toileted to an adult by sign or verbal request. a. _____

b. Male child will eliminate in upright position as well as seated. b. _____

c. The child will go to the bathroom independently. c. _____

IV. *Undressing Skills*

Date Achieved

A. Readiness

1. Passive Cooperation
   a. Child passively cooperates while being undressed by caregiver. a. _____

2. Active Cooperation
   a. Child holds out an arm or leg to aid adult undressing him/her. a. _____

B. Clothing Removal

1. Tee Shirt
   a. Child will pull off tee shirt over head after caregiver has removed it up to that position. a. _____
   b. Child pulls off tee shirt over head and one arm after caregiver has removed it to that position. b. _____
   c. Child pulls off tee shirt over both arms and head after caregiver has removed it to that position. c. _____
   d. Child independently removes tee shirt. d. _____

2. Front-Opening Garment
   a. Child will pull off a front opening shirt when removed totally from one arm by caregiver and to the forearm of second arm. a. _____
   b. Child pulls off a front-opening shirt from the elbow of one arm. b. _____
   c. Child pulls off a front-opening shirt when on one arm and shoulder. c. _____
   d. Child pulls off a front-opening shirt when the shirt is open and on one arm and resting on the shoulder of the second arm. d. _____
   e. Child independently removes own jacket, shirt, or sweater when fasteners are open. e. _____

3. Pants
   a. Child uses two hands to assist caregiver in pulling down own pants. a. _____
   b. Child pulls down pants over ankles after caregiver has removed it to that position. b _____
   c. Child pulls down pants over knees and feet after caregiver has removed it to that position. c. _____
   d. Child pulls down pants over the hips, knees and ankles after caregiver has removed it to that position. d. _____
   e. Child pulls off pants over waist, hips, knees, ankles and feet. e. _____

4. Socks
   a. Child pulls off sock from toes when caregiver has removed the sock to that position. a. _____
   b. Child pulls off sock from over sole after caregiver has removed the sock to that position. b. _____
   c. Child pulls off sock from heel after caregiver has removed it to that position. c. _____
   d. Child pulls off sock over ankle independently. d. _____

Date Achieved

5. Shoes
   a. Child pulls off a partially removed shoe from the toe. a. _____
   b. Child pulls off a partially removed shoe from the toe and middle sole area after caregiver has removed it to that position. b. _____
   c. Child pulls off shoe over the heel, sole and toes. c. _____
   d. Child pulls off shoe when the fasteners are undone independently (bows, snaps, buckles, laces.) d. _____
   e. Child undoes fasteners on own shoes and removes shoes. e _____
6. Hat
   a. Child pulls hat off head when the hat is sitting on top of head. a. _____
   b. Child pulls hat off head when the hat is unfastened and is on forehead. b. _____
   c. Child pulls off hat from head when the hat is over ears and unfastened. c. _____
   d. Child unsnaps hat and removes it. d. _____
   e. Child unties hat and removes it. e. _____
   f. Child unbuttons hat and removes it. f. _____
7. Mittens
   a. Child will remove one mitten when it has been removed by caregiver to finger tips with other free hand. a. _____
   b. Child will remove mittens when all fingers and thumb is in the mitten and one hand is free. b. _____
   c. Child removes mittens completely when both hands are covered with mittens. c. _____
8. Unzippering
   a. Child cooperatively assists caregiver with pulling down own zipper. a. _____
   b. Child pulls down own zipper after being started by an adult. b. _____
   c. Child unzips own jacket when wearing it. c. _____
9. Unbuttoning
   a. Child holds small objects with a pincer grasp. a. _____
   b. Child pushes button through a button hole to an unbuttoned position after caregiver has pushed it through half way when using a button board. b. _____
   c. Child pushes button through button hole to unbuttoned position after caregiver has pushed it through half way on child's jacket. c. _____
   d. Child pushes button through button hole and pulls it through with other hand on button board. d. _____
   e. Child pushes button through button hole and pulls it through with other hand on own jacket. e. _____

Date Achieved

10. Unsnapping
    a. Child cooperatively assists caregiver by allowing caregiver to place his/her hands over child's to pull snap apart. a. _____
    b. Child pulls snap apart when using a snap board or block. b. _____
    c. Child pulls snaps apart on own jacket to remove the jacket. c. _____
11. Placing Clothes in Proper Place After Removing
    a. Child will place smock in appropriate closet or hook at school. a. _____
    b. Child points to closet when told by an adult, "Show me where coats go." b. _____
    c. Child assists caregiver in hanging child's jacket on hook or hanger. c. _____
    d. Child locates own hook and independently hangs up jacket. d. _____

v *Dressing Skills*

Date Achieved

A. Readiness

1. Identifying Clothing

a. Child correctly identifies clothing items by pointing to each item when adult asks, "Show me your hat," etc. a. _____

b. Child correctly identifies body part where each clothing article belongs. b. _____

2. Passive Cooperation

a. Child passively cooperatives while being dressed by caregiver. a. _____

3. Active Cooperation

a. Child assists caregiver in dressing by holding out arms, legs, bending head, etc. a. _____

B. Dressing

1. Tee Shirt

a. Child will pull tee shirt down over chest and stomach after caregiver has placed the child's head and arms through it. a. _____

b. Child will put one arm through sleeve of tee shirt after his/her head and one arm is already placed in it by caregiver and pulls it down over head. b. _____

c. Child puts two arms into sleeves of tee shirt after it has been placed over his/her head and pulls shirt down over chest and stomach independently. c. _____

d. Child places head through neck hole of tee shirt, puts arms through sleeve holes and pulls shirt down over chest and stomach independently. d. _____

2. Shoes

a. Child steps into shoe after caregiver has placed child's toes and sole in the shoe. a. _____

b. Child puts shoe on over heel after caregiver has placed child's toes and sole into it. b. _____

c. Child pulls his/her shoe over sole and heel after caregiver has placed child's toes in the shoe. c. _____

d. Child places foot into the toe area of shoe and pulls it over his sole and heel. d. _____

e. Child places shoes on the correct feet. e. _____

3. Socks

a. Child pulls up socks from the heel to the ankle after sock is pulled to heel position by caregiver. a. _____

b. Child pulls up sock from sole over the ankle after sock is pulled to sole position by caregiver. b. _____

c. Child pulls up sock from the toes over the ankle after sock is pulled to toes by caregiver. c. _____

d. Child puts on sock and pulls it up over the ankle. d. _____

Date Achieved

4. Long and Short Pants
   a. Child pulls up pants from the hips to waist after pants are placed on hips by caregiver. a. _____
   b. Child pulls up pants from knees to waist after pants are placed at knees position by caregiver. b. _____
   c. Child will pull up pants from ankle to the waist after pants are placed at ankle position by caregiver. c. _____
   d. Child will put legs through the leg openings and pull up pants independently. d. _____
5. Hat
   a. Child will pull hat down over ears after hat is placed above them by caregiver. a. _____
   b. Child will pull hat down over crown and ears after hat is placed sitting on crown by caregiver. b. _____
   c. Child will pull a hat down over his crown and ears independently. c. _____
   d. Child places hat on top of head and pulls it down over his crown, temples and ear independently. d. _____
6. Mittens
   a. Child will pull mittens over wrists when one hand is free and caregiver has pulled the mitten to palm. a. _____
   b. Child will pull mitten over palm and wrist when one hand is free after caregiver has pulled mitten to cover fingers. b. _____
   c. Child will pull mitten over fingers, palm and wrist after caregiver has placed mitten on child's finger tips and child's other hand is free. c. _____
   d. Child places finger tips in mitten and pulls it up over fingers, palm and wrist with one hand free. d. _____
   e. Child puts mittens on both hands. e. _____
7. Zippering Jacket
   a. Child will assist caregiver in pulling up a zipper using graduated manual guidance after caregiver has placed zipper on the track. a. _____
   b. Child pulls up zipper on a zipper board after caregiver has placed it on the track. b. _____
   c. Child pulls up zipper on own jacket after caregiver has placed it on the track. c. _____
   d. Child secures zipper into the fastener and pulls it up when using the zipper board and jacket. d. _____
   e. Child puts zipper into the track fasteners and pulls up zipper. e. _____

Date Achieved

8. Buttoning
   a. Child will hold object using the pincer grasp. a. _____
   b. Child pulls a button through the button hole when button is already placed half way through hole on a button board. b. _____
   c. Child will pull a button through the button hole when button is already placed half way through the hole on child's own jacket. c. _____
   d. Child pushes a button half way through a button hole and uses the other hand to pull the button through hole to button position. d. _____

9. Snapping
   a. Child pushes a snap together after caregiver has placed it in that position. a. _____
   b. Child places one side of a snap on the other and squeezes the snap closed on a snap board. b. _____
   c. Child places one side of a snap on the other and squeezes the snap closed on own jacket. c. _____

10. Jacket/Front-Opening Garment

Method I (a,b,c,d)
   a. After jacket is placed on table or floor with collar facing child and inside of jacket is facing upward, child places hands and arms inside of two sleeve holes. (jacket put in position by caregiver) a. _____
   b. After jacket is put into above position by caregiver, child puts arms through sleeves and flips jacket over his/her head into wearing position. b. _____
   c. Child places jacket on table or floor into above position. c. _____
   d. Child independently puts on jacket using this method. d. _____

Method II (a,b,c,d)
   a. Jacket is placed by caregiver over back of small chair with inside of jacket facing out. Child turns his/her back to chair. a. _____
   b. Child backs into chair pushing his/her arms through the sleeves after jacket has been placed on chair as above by caregiver. b. _____
   c. Child places jacket on back of small chair with inside of jacket facing child. c. _____
   d. Child independently puts on jacket using this method. d. _____

Method III (a,b,c,d)
   a. Child holds jacket with the inside facing the child. a. _____
   b. Child holds jacket with inside facing child, crosses one hand over chest and places arm in appropriate sleeve. b. _____
   c. Child places free hand into second sleeve opening and pushes arm through. c. _____
   d. Child removes own jacket from the hook and puts it on independently using one of the three described methods. d. _____

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